


PTO/SB/22 (08-03)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) JDS-3021249
In re Application of Copner et al.		
Application Number 10/082,328		Filed 2/26/2002
For Athermal Interferometer		
Art Unit 2877		Examiner P. CONNOLLY
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and appropriate non-small entity fee are as follows (check time period desired):		
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____	
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 450.00	
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____	
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____	
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____		
<input type="checkbox"/> A check in the amount of the fee is enclosed		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0010		
I have enclosed a duplicate copy of this sheet		
I am the <input type="checkbox"/> applicant/inventor.		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).		
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number 34,368		
<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
_____ January 21, 2005 Date		 _____ Signature
_____ (703) 838-7683 Telephone Number		_____ Randy W. Lacasse Typed or Printed Name
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
Total of 1 forms are submitted.		

USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1460, Alexandria, VA 22313-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

If you need assistance in completing the form, call 1-800-PTO-9198 and select option 2.

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